

**TO:** HCCBG In-Home Aide Providers

**SUBJECT:** Consumer-Directed Care Services Using Home and Community Care Block Grant Funds

**DATE:** March 27, 2003

The NC Division of Aging, in conjunction with the NC Department of Health and Human Services (DHHS), Office of Long Term Care, as well as other DHHS divisions, is investigating the use of the Consumer-Directed Care (CDC) model, as a service delivery option, as described in the Office of Long Term Care's Real Choice Consumer-Directed Care RFP. CDC is a different type of service provision than the traditional agency-directed service delivery, which is currently the normal practice in NC's aging services.

The Real Choice Grant's Consumer-Directed Care RFP only allows the use of Consumer-Directed Care concepts in Attendant Care services. As it pertains to the Home and Community Care Block Grant (HCCBG), Attendant Care Services in a Consumer-Directed Care model can include any or all levels of the HCCBG in-home aide service. Any agency wishing to use HCCBG funds to provide CDC Attendant Care services at this time must apply and be accepted as a Real Choice Pilot Project. An agency awarded a Real Choice Pilot Project grant may request a 14-month waiver from the NC Division of Aging to provide Consumer-Directed Care using HCCBG funds and to utilize up to 25% of their In-Home Aide allocation for CDC Attendant Care services. The waiver will free the agency from compliance with the In-Home Aide Service Standards, for its piloting of CDC Attendant Care services.

The agency requesting the CDC waiver must have received approval from the county and the Area Agency on Aging to use up to 25% of their In-Home Aide allocation to provide Attendant Care services in a CDC model. Signatures by authorized county officials on the DoA-732 Provider Service Summary indicating CDC Attendant Care as a funded service will document county approval. Attendant Care services funded by the HCCBG in the Real Choice pilot projects will be subject to certain assurances, including those listed below, as determined by the NC Division of Aging at the time the waiver is granted.

Agencies receiving a waiver from the NC Division of Aging to provide Attendant Care services with HCCBG funding shall assure that the following requirements are met and documented in a manner consistent with HCCBG policies.

- Targeting of services based on priority;
- Determining client eligibility for HCCBG services;

- Determining client need for in-home aide/attendant care services;
- Providing information to the client regarding traditional agency directed service and consumer directed care service; and
- Determining clients' ability to self-direct care either directly or by a designated surrogate, such as a caregiver.

All clients interested in the Consumer-Directed Care model must be able to safely direct their own care (or have a surrogate decision-maker acting on their behalf). If a client is determined inappropriate for Consumer-Directed Care, then the pilot program must begin the process for traditional-agency directed care. IF A CLIENT IS DETERMINED APPROPRIATE FOR CONSUMER-DIRECTED CARE WITHIN A CDC PILOT PROJECT USING HCCBG FUNDS, THEN THE AGENCY MUST INCLUDE THE PROCEDURES BELOW IN ITS OFFERING OF CDC SERVICES:

- Development of a client-directed individual plan of care, which must address client information, specified measurable goals, attendant services, other items/services that would help increase independence, and reasons for termination of consumer-directed services;
- A minimum of quarterly contact with the client to determine continued need for service and appropriateness of Consumer-Directed Care as the MODEL service provision;
- Annual reassessment of the client to determine the continuing need for in-home/attendant care services;
- Quarterly review of the client-directed individual plan of care; and
- Informing clients of their rights.

With funds received from the Real Choice Grant, agencies will be modifying or developing policy to provide services through a Consumer-Directed Care model. As a part of this effort, all funds budgeted to a client for use in meeting the approved plan of care shall be handled through a financial management service. Clients cannot receive any money themselves; but will direct the financial management service to pay for the services they have chosen. Clients will have the opportunity to save and purchase additional items identified on their approved client-directed individual plan of care to enhance their independence if they do not utilize their entire budget for Attendant Care services each month.

In requesting a waiver, an agency must complete a Service Cost Computation worksheet (DoA-732A) indicating the total funds that will be used for Consumer-Directed Care services. The agency must also specify the 10% match for the HCCBG funds used in this model. Agencies will register all clients being served through the CDC model using the DoA-101 Client Registration Form; however, reimbursement will be provided on a non-unit basis. The agency will combine payments made to financial management services for all consumer-directed care clients and submit monthly non-unit reimbursement requests to the Division of

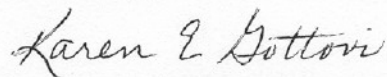
Aging using special service codes provided by the Division. In addition, agencies will be required to submit a quarterly report for the purpose of providing the NC Division of Aging with additional information on hours of service and any additional items/services provided. The Division of Aging will provide a report format to pilot program agencies receiving a waiver.

Agencies will be responsible for determining the method by which clients will be assessed for possible participation in the Consumer-Directed Care model. Agencies must also determine the policies regarding the amount of funds budgeted per client to meet the client-directed individual plan of care.

The NC Division of Aging, in conjunction with the AAA, will monitor any agency receiving a waiver for Consumer-Directed Care prior to the end of the 14-month period that the waiver is in effect. The NC Division of Aging reserves the right to terminate the waiver for just cause at any time. Technical assistance from the NC Division of Aging will be available to Real Choice pilot project agencies regarding CDC service delivery using HCCBG funds.

A written waiver request to provide Consumer-Directed Care using HCCBG funds shall be made to Karen Gottovi, Director, NC Division of Aging at 2101 Mail Service Center, Raleigh, NC 27699-2101. The written request shall be accompanied by a completed DoA-32, a completed DoA-732A, a copy of the notification letter indicating Real Choice Grant award, a copy of the agency's Real Choice grant application, and written approval from Area Agency on Aging. Questions or additional information regarding the contents of this Administrative Letter may be directed to either Jodi Hernandez or Julie Bell at 919-733-3983 or via e-mail at [jodi.hernandez@ncmail.net](mailto:jodi.hernandez@ncmail.net) or [julie.bell@ncmail.net](mailto:julie.bell@ncmail.net).

Sincerely,



Karen E. Gottovi, Director  
NC Division of Aging

KEG/jlh

Cc: Area Agency on Aging Directors  
DSS Adult Program Reps  
Lynda McDaniel  
John Tanner  
DoA Staff